



Town of Fishkill Zoning Department

Request for a Zoning Variance

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This application must be completed and submitted to the Zoning Administrator no later than the date stated on the procedures. Incomplete or inaccurate applications will not be considered for action by the Zoning Board of Appeals.

I. Variance Information:

1. Location of Parcel:

2. Zoning District: _____

3. Grid Number: _____

4. Variance(s) Requested:

II. General Information:

5. Name of Applicant(s): _____

6. Applicant's Signature: _____ 7. Date: _____

8. Address of Applicant:

9. Phone Number (home): _____ Phone Number (work): _____

10. Name of Owner: _____

11. Owner's Signature: _____ 12. Date: _____

13. Address of Owner:

14. Phone Number (home): _____ Phone Number (work): _____

For Official Use Only

Case Number: _____

Application Deadline: _____

Date Application Received: _____

Newspapers & Abutters: _____

Date of Hearing: _____

Fee Paid at Receipt: _____

Distribution/Mailed: _____



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You should answer all questions and provide as much information as possible in order to give the Zoning Board of Appeals the necessary facts to review your case. If you do not have enough room to complete your answers, you may put them on a separate sheet of paper.

15. Why can't you meet the requirements of the Zoning Ordinance? What is your hardship if you are forced to comply with the conditions as stated in the ordinance?

16. Are there any unusual or extraordinary conditions that apply to your property that do not exist with other properties in your neighborhood?

17. Why do you think that granting your request will be good rather than bad for the surrounding neighborhood?

18. Did you do something that now causes you to request a variance?

No _____ If yes, explain

19. If you are requesting an Area Variance, what is the distance from your proposed construction to the residences of adjoining property owners?

Left side yard: _____ Right side yard: _____ Front yard: _____ Rear yard: _____

20. If you are requesting an Area Variance, will your proposed construction be over your septic system or any underground utilities?

21. Other information that you think will help the staff of the Zoning Board of Appeals understand why you are requesting a variance.:

22. Plot Plan - Draw plot plan on attached grid sheet, showing all pertinent information called for in "Procedure for Filing a Variance Appeal" or use other suitable means to show layout of lot, buildings, roads, identifying land marks, etc. A stamped and signed survey is the preferred document, and may be required. This will be determined by the Zoning Administrator.



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Is the property within 500 feet of any of the items listed on page 1? (See 1-C) If yes, describe:

I hereby acknowledge that I have read this application and state the above information is correct and agree to comply with all the town and count ordinances and state laws regulating construction.

I also hereby the Town of Fishkill Zoning Administrator or members of the Town of Fishkill Zoning Board of Appeals and any town official and/or consultant employed by the Town of Fishkill to enter on and inspect the property proposed for appeal by this application, at any reasonable hour of the day, including Saturday and Sunday.

I also understand that the application fee is non-refundable once the appeal process starts and further, that if it becomes necessary for the town to incur consultation fees for advice related to the appeal (i.e. Lawyer, Engineer, etc.) that I will be responsible for assuming those charges.

I understand that only those points specifically mentioned are affected by action taken on this appeal.

Signature of Applicant

Date: _____